STATE OF CALIFORNIA RRF-1 (Rev. 02/2021) MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 STREET ADDRESS: 1300 I Street Sacramento, CA 95814 (916) 210-6400 WEBSITE ADDRESS: www.oag.ca.gov/charities	021)       ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA       (For an and a stress a						ISTICE GE 1 of 5
UNIVERSITY STUDENT CENTER OF       Check if:         CALIFORNIA STATE UNIVERSITY, STANISLAUS       Check if:         Name of Organization       Amended report							
ONE UNIVERSITY CIRCLE Address (Number and Street)				State Charity Registration Number <b>CT</b> 097368			
TURLOCK, CA 95382				Corporation or Organization No. 1888950			
City or Town, State, and ZIP Code (209) 667-3827				Federal Employer ID No. 77-0362744			
Telephone Number E-mail Address							
ANNUAL RE	GISTRATION	RENEWAL FEE SCHEDULE (11 Cal. Make Check Payable to Departr			311, and 312)		
Total RevenueFeeTotal RevenueFeeTotal RevenueLess than \$50,000\$25Between \$250,001 and \$1 million\$100Between \$20,000,001 and \$100 millionBetween \$50,000 and \$100,000\$50Between \$1,000,001 and \$5 million\$200Between \$100,000,001 and \$500 millionBetween \$100,001 and \$250,000\$75Between \$5,000,001 and \$20 million\$400Greater than \$500 million				0,001 and \$500 million	-		
PART A - ACTIVITIES For your most recent full accounting period (beginning 07/01/2022 ending 06/30/2023 ) list:							
Total Revenue (including noncash contributions)       6,562,165       Noncash Contributions       0       Total Assets       8,926,319         Program Expenses       1,820,636       Total Expenses       5,766,539							
PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT							
Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.							No
<ol> <li>During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?</li> </ol>					Yes	x	
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?							x
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?							x
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?							x
5. During this reporting period, did the organization receive any governmental funding?							x
6. During this reporting period, did the organization hold a raffle for charitable purposes?							x
7. Does the organization conduct a vehicle donation program?							x
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?						x	
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?							x
I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.							
CESAR RUMAYOR EXECUTIVE DIRECTOR							
Signature of Authorized Agent	Pri	inted Name		Fitle	Date		